

One Path One Goal

Marvin Southard, DSW

Director

Los Angeles County Department of
Mental Health

The Term Dual Diagnosis

- Common broad term
- Presence of two independent medical disorders
- Coexistence of Mental Health Disorder and Alcohol or Drug (AOD) Abuse Disorder

Dual Diagnosis Services Los Angeles County

- Collaboration with Alcohol and Drug Program Administration (ADPA)
- Joint Funding for Programs
- Integration of Mental Health and Substance Abuse Services
- No Wrong Door-matching consumers with needed service

Case Management

- Single fixed point of responsibility
- Integration through parallel coordination
- Seamless treatment

Structural Barriers

- Separate Funding Streams
- Treating consumers in two separate systems
- Philosophy-different treatment approaches and goals
- Differing educational level of staff - credentialing/training
- Different Management Information Systems

Mental Illness and Substance Disorders

- High Mortality Rate - 28.1 yrs loss
- Cost the United States over \$300 billion per year
- One fourth of that cost is related to health care problems

Goals of the Collaboration

- Lead to full and sober lives
- Participants in their communities
- Culturally competent services
- Housing, Education, Employment

Remove System Barriers

- Establish a minimum standard of care for the dually diagnosed consumers - DMH Dual Diagnosis Policy
- Build relationships between stakeholders across service systems
- Cross-train program administrators and staff – set minimum requirements for staff competencies

System of Care Planning Process

- Top DMH management, commissioners
- Top ADPA management, commissioners
- Key provider organizations
- Design system to identify and formalize common areas of service

Planning Process

- Recommend improved methods of service, communication
- Coordination and cooperation

Vital Collaboration

- Shared responsibility
- Commitment to find solutions
- Review of existing service efforts
- Identify and close gaps in service
- Ensure flexibility in systems
- Improved communication

Joint Staff Training

- DMH/ADPA developed and fully funded a Dual Diagnosis Certificated Program at UCLA
- Directly operated and provider staff may attend
- 90 hours of training over 9 months

Closing the Service Gaps

- Non traditional problem solving
- Eliminating weaknesses
- Better use of our strengths
- Challenging resistance

Understanding the Challenges in the Delivery of Services

- Assertive Outreach
- 24 Hour Emergency Services
- Holiday/Weekend Support Services
- Family Programs-Support /Education
- Peer Support
- Detoxification/Sober Living/ Housing Assistance

Understanding the Challenge Part II

- Cultural Sensitivity and Client Focus
- Social Milieu/Clubhouse Setting
- Residential Care
- Outpatient Substance Abuse Treatment

Collaborative Projects

- Substance Abusing Mentally Ill Task Force (SAMI)
- In 1988, a group of concerned community and county departments advocates formed the SAMI Task Force
- This Task Force continues to convene monthly as a forum to exchange ideas on SAMI issues and advise the DMH executive staff on policy for this population

The River Community

- Integration through blended funding began in 1987 when DHS and DMH jointly funded The River Community, a residential treatment facility for dually diagnosed individuals.
- Currently, this facility has thirty-eight beds and is recognized as the first and one of the foremost integrated treatment facilities in the nation

TELECARE LA CASA

- Integrated program established in 1997
- Has voluntary and involuntary residential treatment services for dually diagnosed individuals
- 23-hour Crisis Beds (11)
- Staffs have mental health and substance abuse treatment expertise

Behavioral Health Services (BHS) Pacifica House

- Twelve bed AOD program designed specifically for individuals who meet DMH target population definition and have a concurrent substance abuse diagnosis
- Goal of the program is to achieve maximum reduction of disability and optimum level of functioning through formal and peer counseling services in a residential milieu
- Average length of stay is six months. Weekly case conferences with DMH staff are held at the residential facility

Los Angeles Centers for Alcohol and Drug Abuse - Allen House

- an eight bed AOD residential facility to assist mentally ill consumers to achieve sobriety
- Weekly case conferences are held with the DMH case manager
- DMH psychiatrist spends one half-day a week at the facility
- Average length of stay is six to nine months

PEER ADVOCACY TRAINING PROJECT

- In February 1997, the DMH/ADPA developed a new program to enhance services to individuals suffering with dual diagnoses
- This training project attempts to positively impact both systems by facilitating the training and employment of dually diagnosed persons who have achieved sustained stability
- The project is a thirteen-week course consisting of didactic and on the job training

Peer Advocacy continued

- Most are hired in the recovery field
- First class graduates
- 70% employed
- 50% no longer received SSI and are completely self sustaining

Sidekicks-1998

- Six Dual Diagnosis Service Integration Teams known as Sidekicks
 - Geographically located
- Each Sidekicks Team consists of
 - Licensed mental health clinician
 - Substance abuse counselor
 - Peer advocate

Sidekicks Continued

- Provides:
 - Mobile services
 - Direct and indirect treatment services
 - Assertive outreach
 - Housing/transportation
 - Social skills training
 - Relapse prevention

BHS Hollywood Family Treatment Center

- Outpatient AOD program is uniquely designed to create a continuum of care for individuals with co-occurring dual disorder
- Program was implemented July 1, 1997
- Serves approximately 24 active consumers at a time and over 100 in one year

Mental Health Clinics

How it works

- Geographically paired with Alcohol and Drug Providers
- Monthly Dual Diagnosis Advisory Meetings
- Each Service Area has a Dual Diagnosis Coordinator
- Develop Local Plan of Action

Joint Funding for Detoxification Beds

- BHS American Recovery
- Gateways Hospital

How It Works

- All Coordinators meet together monthly
- Monitor trends from a system perspective
- Develop new programs and procedures

Outcomes

- New adult assessment forms
- New child and adolescent assessment forms- identify high risk youth
- Better identification of substance use, abuse and dependence
- Identification of other systems involved, i.e., parole, social services, rehabilitation etc.

Outcomes

- Consumer driven services
- Less homelessness
- Less time in jail
- More time spent in programs